

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: SHUEN-SHING HSIAO

SÉRIAL NO.: 09/994.690

FILED: November 28, 2001

GROUP ART UNIT: 2834

EXAMINER: D. Scheuermann

ATTY. REFERENCE: HSIA3009/BEU

STRUCTURE AND MANUFACTURING METHOD OF A LINEAR STEPPING MOTOR

PETITION FOR EXTENSION OF TIME

COMMISSIONER OF PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Applicant requests that the time for taking action in this case be extended pursuant to 37 CFR 1.136 (a) for:

The fee set in 37 CFR 1.17 for the extension of time is \$55.00.

- Fee enclosed. Please charge any additional fee required for this extension of time to **Deposit Account Number 02-0200**. A duplicate copy of this paper is enclosed.
- Charge fee to **Deposit Account Number 02-0200**. A duplicate copy of this paper is enclosed.
- Applicant is a **small entity** entitled to pay reduced fees in this application.
A verified small entity statement has been filed. is enclosed.

Also enclosed is a:

Response Notice of Appeal Appeal Brief

23364

Customer Number

Phone: (703) 683-0500

DATE: October 17, 2003

10/22/2003 EEL08ES 00000015 099946.90

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55.00 DE

Respectfully submitted,

Benjamin E. Urcia
Attorney for Applicant
Registration Number: 33,881

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION QF: SHUEN-SHING HSIAO
SERIAL NO.: 09/994,690

OCT 17 2003

FILED: November 28, 2001

FOR: STRUCTURE AND MANUFACTURING METHOD
OF A LINEAR STEPPING MOTOR

GROUP ART UNIT: 2834

EXAMINER: D. Scheuermann

ATTY. REFERENCE: HSIA3009/BEU

COMMISSIONER OF PATENTS

P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a communication/amendment in the above-identified application.

Small entity status under 37 CFR 1.9 and 1.27 is claimed.
 No additional fee is required.

The fee, if any, has been calculated as shown below:

Fee Basis	Number of Claims After Amendment	Highest Number Previously Paid For	Extra Claims	Small Entity	Full Fee
Total Claims	-	¹ =	³	$\times \$ 9 =$	$\times \$ 18 =$
Independent Claims	-	² =	³	$\times \$ 43 =$	$\times \$ 86 =$
<input type="checkbox"/> First Presentation of Proper Multiple Dependent Claim			$+ \$145 =$	$+ \$290 =$	
TOTAL					

If less than 20 enter 20.

² If less than 3 enter 3.

³ If less than 0 enter 0.

Please charge my **Deposit Account Number 02-0200** in the amount of \$ _____. A duplicate copy of this sheet is attached.
 A check in the amount of \$ _____ is attached.
 The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees due under 37 CFR 1.16 and 37 CFR 1.17 or credit any overpayment to **Deposit Account Number 02-0200**. A duplicate copy of this sheet is attached.
 Also enclosed is/are: **PETITION FOR EXTENSION OF TIME (1 MONTH)**

23364

Customer Number
Phone: (703) 683-0500

DATE: October 17, 2003

Respectfully submitted,



Benjamin E. Urcia
Attorney for Applicant
Registration Number: 33,805